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UNITED STATES DISTRICT COURT

SOUTHERN DISTRICT OF CALIFORNIA

MS. L, *et al*,,

Petitioners-Plaintiffs,

vs.

U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT, et al,

Respondents-Defendants.

Case No. 3:18-cv-0428 DMS MDD

DEFENDANTS' PROPOSED EXPANDED *MS. L* CLASS IDENTIFICATION PLAN SUMMARY

In accordance with the Court's March 28, 2019 Order Setting Further Status Conference, ECF No. 391, Defendants hereby submit the attached Proposed Expanded *Ms. L.* Class Identification Plan Summary, and supporting declarations.

DATED: April 5, 2019

Respectfully submitted,

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/s/ Sarah B. Fabian
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CERTIFICATE OF SERVICE

IT IS HEREBY CERTIFIED THAT:

I, the undersigned, am a citizen of the United States and am at least eighteen years of age. My business address is Box 868, Ben Franklin Station, Washington DC 20044. I am not a party to the above-entitled action. I have caused service of the accompanying brief on all counsel of record, by electronically filing the foregoing with the Clerk of the District Court using its ECF System, which electronically provides notice.

I declare under penalty of perjury that the foregoing is true and correct.

DATED: April 5, 2019

s/ Sarah B. Fabian
Sarah B. Fabian

PROPOSED EXPANDED *MS. L* CLASS IDENTIFICATION PLAN SUMMARY

On March 8, 2019, the Court expanded the *Ms. L* class to include adult parents who entered the United States at or between ports of entry on or after July 1, 2017. The Court has also instructed Defendants to put forth a potential plan for identifying the class members within the class expansion period of July 1, 2017, through June 25, 2018.

Defendants' proposed plan to identify potential *Ms. L.* class members within the class expansion period is explained in the attached declarations from Commander Jonathan White of the United States Public Health Service and Dr. Barry Graubard of the National Institutes for Health.

In short, Defendants would identify potential *Ms. L.* class members by identifying their children out of the total population of approximately 47,000 children discharged by the Office of Refugee Resettlement (ORR) during the class expansion period. Defendants would attempt to streamline and accelerate identification of children of potential *Ms. L.* class members by using programmatic knowledge, data analysis, and statistical science to try as best as practicable to segment the population based on the probability that the child's parent is a *Ms. L.* class member. If successful, segmentation would enable Defendants to prioritize children for manual reviews of ORR case management records, which would confirm whether the child was, in fact, separated from a parent who is a *Ms. L.* class member for the class expansion period.

The operational leads for the work would be: Commander Jonathan White for the U.S. Department of Health and Human Services (HHS), Melissa Harper for U.S. Immigration and Customs Enforcement (ICE), and Jay Visconti for U.S. Customs and Border Protection (CBP). They would convene an inter-agency Data Analysis Team. A senior biostatistician (likely Dr. Graubard from the NIH) would serve as the lead for the Data Analysis Team.

Within approximately four weeks of plan activation, Defendants anticipate that the Data Analysis Team would conduct a regression analysis of the possible children of potential class members for the original class period reported in the most recent Joint Status Report, ECF No. 388, using the approximately 12,000 children who were in ORR care on June 26, 2018 as a "training set" to develop a prediction model. The Data Analysis Team would work to validate variables that may be predictive of a child having been separated from a parent (*e.g.*, the age of the child), and attempt to identify any additional demographic features of children separated from parents (as distinct from children who entered the United States without a parent). Through validation, the team would develop a prediction model correlating relevant variables with increased likelihood of parental class membership.

Within approximately eight weeks of plan activation, Defendants anticipate that the Data Analysis team would begin using the prediction model to rank order the children among the population of approximately 47,000 for the class expansion period according to their probability of being children of potential *Ms. L.* class members. They would then begin grouping the children into segments based on statistical probability of parental class membership. Using this method, Defendants would begin targeting manual case file review on the higher-probability groups. In addition, representative samples would be taken from lower-probability groups to test them.

As children are identified as possible children of potential *Ms. L.* class members, Defendants would validate their status jointly.

Within approximately 12 weeks of plan activation, Defendants would begin consolidating information about any newly-identified possible child of a potential *Ms. L.* class member with information about the potential *Ms. L.* class member known to Defendants. Defendants would provide final, rolling lists to Class Counsel. The rolling lists would include basic information including the names and alien numbers of the children and their class member parents, and the parents' last known contact information.

Defendants estimate that identifying all possible children of potential *Ms. L.* class members referred to and discharged by ORR during the expansion period would take at least 12 months, and possibly up to 24 months. The time required to complete the work may be affected by at least three factors. The first is the efficacy of the initial prediction model and the outcomes of sampling of the lower-probability groups (which are not known at this juncture). The second is the pace of manual record review (which will depend on how many qualified contractors Defendants are able to hire and train for the Case File Review Team). The third factor is any meet-and-confer process that may occur after manual reviews for the initial, higher-probability groups are complete.

The primary benefit of Defendants' proposed plan is that, if successful, it would front-load the identification of potential Ms. L. class members and possibly lead to a reduction in the overall time required for manual review. For this reason, it is a more rational approach than a date-ordered or randomized manual review.

UNITED STATES DISTRICT COURT

SOUTHERN DISTRICT OF CALIFORNIA

MS. L., et al. Petitioners-Plaintiffs, vs. U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT, et al., Respondents-Defendants.	Case No. 18cv428 DMS MDD Hon. Dana M. Sabraw

DECLARATION OF JONATHAN WHITE

I, Jonathan White, declare under penalty of perjury, pursuant to 28 U.S.C. § 1746, that my testimony below is true and correct:

1. I am a Commander with the United States Public Health Service Commissioned Corps, and have served at the Department of Health and Human Services ("HHS") in three successive presidential administrations. I am presently assigned to the Office of the Assistant Secretary for Preparedness and Response ("ASPR"), and previously served as the Deputy Director of the Office of Refugee Resettlement ("ORR").

2. The statements in this declaration are based on my personal knowledge, information acquired by me in the course of performing my official duties, information supplied to me by federal government employees, and government records.

3. I am providing this declaration for use by the Defendants and the Court in *Ms. L. v. ICE*, No. 18-cv-428 (S.D. Cal.).

Background and Recommended Methodology

4. My understanding is that on March 8, 2019, this Court expanded the class in *Ms. L.* The class is now defined as: "All adult parents who entered the United States at or between designated ports of entry on or after July 1, 2017, who (1) have been, are, or will

be detained in immigration custody by the DHS, and (2) have a minor child who has been, is or will be separated from them by DHS and has been, is or will be detained in ORR custody, ORR foster care, or DHS custody, absent a determination that the parent is unfit or presents a danger to the child." ECF No. 386. The same qualifications apply to the original and expanded classes. "[T]he class does not include migrant parents with criminal history or communicable disease, or those who are in the interior of the United States or subject to the EO." ECF No. 82.

5. The Defendants have previously identified the children of potential *Ms. L.* class members who were in the care of ORR on June 26, 2018. As I have previously explained, the process of identifying those children involved analysis of dozens of data sets from U.S. Customs and Border Protection (CBP) and U.S. Immigration and Customs Enforcement (ICE), manual review of approximately 12,000 individualized ORR case management records, and reconciliation with sworn testimony from the ORR grantees caring for the children. ECF No. 347-1. Ultimately, this process "was operationally feasible because the children were still in ORR custody, and ORR grantees were able to talk with them about separation and share the information with HHS." *Id.*

6. HHS cannot use the exact same methodology to identify the children of potential class members for the class expansion period of July 1, 2017 through June 25, 2018 for three reasons. First, ORR has discharged the children in its care during the class expansion period, and thus lacks access to those children through grantees. Second, my current understanding is that CBP is likely not able to produce data sets for the time period before April 19, 2018, as CBP did not track parental separation data as a separate searchable data point prior to that time. Third, the sheer number of ORR case management records, covering approximately 47,000 children referred to and discharged by ORR during the class expansion period, would overwhelm ORR's existing resources were it to attempt a manual review of all records in date order. *See* Decl. of Jallyn Sualog, ECF No. 347-2.

7. I have therefore sought to develop a methodology to try as best as practicable to streamline and accelerate the identification of potential *Ms. L.* class members in the class

expansion population by first identifying their children. To that end, I have consulted with Barry Graubard, Ph.D., who is a senior biostatistician for the National Institutes of Health (NIH), National Cancer Institute, Division of Cancer Epidemiology & Genetics, Biostatistics Branch. NIH is an operating division of the U.S. Department of Health and Human Services (HHS).

8. Dr. Graubard has recommended pursuing a methodology that combines statistical analysis and manual review of ORR case management records. His recommendation is set forth in his declaration, which is attached as Exhibit A to the Proposed Expanded *Ms. L.* Class Identification Plan. In my testimony below, I explain how Defendants, based on the information known to them today, would likely implement Dr. Graubard's recommendation. I would serve as the HHS Operational Lead for Reunification for the implementation.

Plan for Implementing Recommended Methodology

9. To implement Dr. Graubard's recommended methodology, Defendants would likely need to perform approximately 12 weeks of intensive data analysis before starting manual reviews. That is, Defendants would likely need 12 weeks to format the data, perform a regression analysis, and build a prediction model to segment and prioritize manual reviews of ORR case management records for the approximately 47,000 possible children of potential Ms. L. class members for the class expansion period. This approach would involve a series of steps, outlined below, that would be informed in real time by the data and would likely evolve as implementation progresses and the Defendants refine methods based on lessons learned.

Within Approximately 4 Weeks of Plan Activation

10. HHS would first prepare a data set encompassing all children referred to ORR starting July 1, 2017, and discharged from ORR care prior to June 26, 2018.[1] I understand

[1] It is possible that some children referred to ORR care in early July 2017 would have entered the United States before July 1, 2017. Such children would not be potential children of possible *Ms. L.* class members.

that set to include approximately 47,000 children. *See* ECF No. 347-1.

11. Defendants would then convene a Data Analysis Team, reporting to the HHS, CBP, and ICE Operational Leads for Reunification, to conduct statistical analyses of the data set. A senior biostatistician (likely Dr. Graubard of the NIH) would serve as the Data Analysis Team lead, reporting directly to the Operational Leads for Reunification.

12. The Data Analysis Team would conduct a regression analysis of the possible children of potential class members reported in the most recent Joint Status Report, ECF No. 388, using the approximately 12,000 children who were in ORR care on June 26, 2018 as a "training set" to develop a prediction model. The Data Analysis Team would work to validate variables that may be predictive of a child having been separated from a parent (*e.g.*, the age of the child), and attempt to identify any additional demographic features of children separated from parents (as distinct from children who entered the United States without a parent). Through validation, the team would develop a prediction model correlating relevant variables with increased likelihood of parental separation.

13. We expect that the data will inform the development of the prediction model, which will evolve in an iterative, stepwise manner. During the process, the Data Analysis Team may request additional data from HHS, CBP, or ICE as appropriate.

Within Approximately 8 Weeks of Plan Activation

14. Once the Data Analysis Team lead determines that an initial version of the prediction model is sufficient for use, the Data Analysis Team will apply it to the approximately 47,000 children for the class expansion period, and rank order children according to their probability of being children of potential *Ms. L.* class members.

15. The Data Analysis Team would then stratify the approximately 47,000 children for the class expansion period into "bands" or "segments" based on statistical probability of parental class membership. The Defendants would prioritize the highest-probability segments for manual review of ORR case management records and any other relevant information.

16. Defendants would build and launch a team of contracted administrative staff to conduct manual reviews of ORR case management records, which are maintained on the UAC Portal. This "Case File Review Team" would follow review protocols informed by the work conducted during the 2018 reunification. They would report to the HHS Operational Lead (who would work with the ORR career staff to train them).

17. Once the manual review of the highest-probability segments begins, the Case File Review Team would begin preparing draft lists of possible children of potential *Ms. L.* class members and providing them to Defendants on a rolling, weekly basis. HHS, CBP, and ICE would review and validate these lists jointly.

18. While the Case File Review Team conducts manual review of the highest-probability segments of children, the Data Analysis Team would conduct statistical sampling of the lower-probability bands. The Case File Review Team would test the samples through blind, manual review to enable the Data Analysis Team to determine whether the sample contains any children of potential *Ms. L.* class members. The outcome of the sampling process may result in adjustments to the variables, prediction model, or segments. It may also inform the approach to manual case file review of the lower-probability bands. If, for example, the samples yield no children of potential *Ms. L.* class members, then it may become appropriate for the parties to meet and confer on further streamlining.

Within Approximately 12 Weeks of Plan Activation

19. HHS would review the discharge type and sponsor information in the UAC Portal to determine: (i) the type of discharge that resulted in the child exiting ORR care; (ii) whether a potential *Ms. L.* class member is the child's sponsor of record; and (iii) the name, address, and relationship of the sponsor for each child of a potential *Ms. L.* class member who was discharged to an individual sponsor.

20. Defendants would consolidate the HHS and DHS information into final, rolling lists, which DOJ would provide to Class Counsel. Where available, the rolling lists would include the names and alien identification numbers for both children and their class member

parents; their dates of apprehension; the dates children were referred to and discharged from ORR care, and the type of discharge; parent detention status; and last known parent contact information.

Total Time for Completion

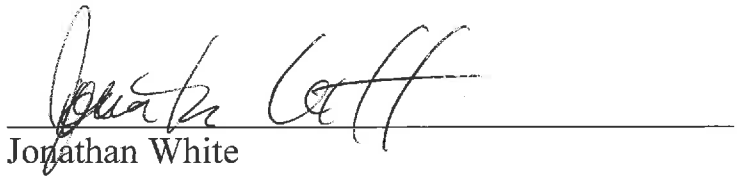
21. Jallyn Sualog, the Deputy Director for Children's Programs for ORR, testified previously that it would likely take between 235 and 471 consecutive calendar days for 100 ORR analysts to manually review the ORR case management records for the approximately 47,000 children in ORR care during the class expansion period. If Defendants were able to hire qualified contractors, then I expect it would take at least the same number of consecutive calendar days to perform the same work on a date-ordered or randomized manual file review.

22. The goal of pursuing Dr. Graubard's recommended methodology is to identify children of potential *Ms. L.* class members in the class expansion population in a faster and more concentrated way than would occur through a date-ordered or randomized manual file review. The application of the methodology in this context is novel.

23. The time for completing the process using Dr. Graubard's recommended methodology—including manual review of ORR case management records prioritized through probabilistic segmentation—may vary for at least three reasons. First, the efficacy of the initial prediction model, and the outcomes of the sampling of the lower-probability segments, are not known at this juncture. They are likely to drive the time for completion. Second, the pace of the prioritized manual review will depend on the number of qualified contractors that Defendants are able to identify and retain for the Case File Review Team, as well as the speed with which Defendants are able to scale up the team, and the efficiencies that may or may not materialize from having a dedicated group of professionals manually reviewing case files over a period of months. Third, any meet-and-confer process that occurs after completion of the sampling phase could affect the time for completion. Many of these considerations are outside Defendants' control.

24. Given the complexity of the task and the variables and data known to Defendants at this time, a reasonable assumption is that it will take at least 12 months, and possibly up to 24 months, for Defendants to complete the process of identifying potential *Ms. L.* class members in the class expansion population through universal manual review. The primary benefit of pursuing Dr. Graubard's recommended methodology is that, if successful, it would front-load the identification of potential *Ms. L.* class members and possibly lead to a reduction in the overall time required for manual review.

Executed on April 5, 2019.



Jonathan White

UNITED STATES DISTRICT COURT

SOUTHERN DISTRICT OF CALIFORNIA

MS. L., et al. Petitioners-Plaintiffs, vs. U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT, et al., Respondents-Defendants.	Case No. 18cv428 DMS MDD Hon. Dana M. Sabraw

DECLARATION OF BARRY GRAUBARD

I, Barry I. Graubard, declare under penalty of perjury, pursuant to 28 U.S.C. § 1746, that my testimony below is true and correct:

1. I am a Senior Investigator in the Biostatistics Branch of the National Cancer Institute. *See* https://dceg.cancer.gov/about/staff-directory/biographies/A-J/graubard-barry (last visited April 5, 2019). A copy of my curriculum vitae is attached as Exhibit 1.

2. I have more than 40 years of experience conducting statistical methods research in biostatistics and survey sampling, and in collaborating with scientists on research in cancer epidemiology and other areas of epidemiology and public health. For example, I recently performed modeling to estimate the one-year probability that an individual would get oropharyngeal cancer based on various risk factors. The paper reporting this work has been submitted for publication to a peer-reviewed journal. The statistical techniques used in this study were regression modeling and cross validation.

3. I have also used other regression methods such as Cox proportional hazard regression to predict length of survival (e.g., among liver transplant recipients based on patient characteristics and clinical risk factors).

4. The statements in this declaration are based on my personal knowledge, information acquired by me in the course of performing my official duties, information supplied to me by federal government employees, and government records.

5. I am making this declaration for use in *Ms. L. v. U.S. Immigration and Customs Enforcement*, No. 18cv428 (S.D. Cal.).

6. I understand that on March 8, 2019, the Court in *Ms. L.* modified the class definition. The class now includes: "All adult parents who entered the United States at or between designated ports of entry on or after July 1, 2017, who (1) have been, are, or will be detained in immigration custody by the DHS, and (2) have a minor child who has been, is or will be separated from them by DHS and has been, is or will be detained in ORR custody, ORR foster care, or DHS custody, absent a determination that the parent is unfit or presents a danger to the child." ECF No. 386. I further understand that the modified class is subject to the same qualifications as the original certified class, and that as a result, it is still the case that "the class does not include migrant parents with criminal history or communicable disease, or those who are in the interior of the United States or subject to the EO." ECF No. 82.

7. Commander Jonathan White of the United States Public Health Services has asked me to recommend a statistical methodology to try to streamline and accelerate the identification of the children of *Ms. L.* class members who were referred to and discharged by ORR during the class expansion period of July 1, 2017 through June 25, 2018, and to advise an inter-agency Data Analysis Team that would seek to implement the methodology. My understanding is that approximately 47,000 alien children were referred to and discharged by ORR during that period. An optimal statistical methodology would enable ORR to prioritize manual record reviews for the approximately 47,000 children based on the probability that the child's parent is a *Ms. L.* class member.

8. I will refer to the approximately 47,000 children who were referred to and discharged by ORR during the class expansion period of July 1, 2017 and June 25, 2018 as the "test set."

9. I will apply two assumptions to promote an inclusive and through review. First, I will assume that any alien child who was apprehended by the U.S. Department of Homeland Security (DHS) at the southern border together with a parent, and who was referred to ORR care by DHS, was possibly separated from the parent by the federal government. Second, I will assume that any alien child who was referred to and discharged by ORR during the class expansion period is a child of a potential *Ms. L.* class member. These assumptions can be expected to include many children who were not separated from their parents, but will promote a thorough review.

10. Based on these assumptions, I recommend using an empirically-determined model to try to predict the probability for each child that a parent accompanied the child before he or she was referred to ORR care. These probabilities would be used to group children from the test set into strata based on the probability that a parent is a potential class member. A separate Case File Review Team would then review the ORR case management records for the children in the test set. The records of the children in the strata with the highest probabilities would be reviewed before strata with lower probabilities, thereby identifying more children of class members in the test set in a speedier fashion.

11. I recommend that the Data Analysis Team seek to develop a prediction model by analyzing data for the approximately 12,000 children in ORR care as of June 26, 2018 (the "training set"). I understand that at this point, the government knows which children in the training set were children of potential *Ms. L.* class members. *See* Joint Status Report, ECF No. 388. By analyzing the data associated with these children, the Data Analysis Team would seek to identify common independent variables that together would provide a framework for rank ordering other children by the likelihood that their parent is a *Ms. L.* class member. The list of potentially relevant independent variables would include:

- Child age, because tender-age and young children are more dependent on parents than older children, and may therefore be more likely to travel with parents than with other adults or children;

- The referring U.S. Customs and Border Protection ("CBP") Sector, because I understand that at least one CBP sector is alleged to have conducted a pilot program involving increased rates of referrals for prosecutions of immigration law violations;
- Sibling information, because younger children who are not in sibling groups may have a higher probability of having been separated than younger children accompanied by older siblings;
- ORR discharge type, because discharge to a family member other than a parent, or discharge type other than release to an individual sponsor, might correlate with a higher probability of a child having been separated from a parent;
- Appearance of the word "separated" or "separation" in text box data fields on the ORR Portal corresponding with either the initial assessment of the child or a Significant Incident Report; and
- Inclusion on any informal tracking list of separated children that ORR created during the class expansion period.

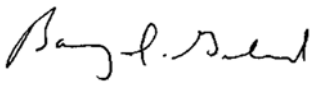
12. To develop a prediction model, the Data Analysis Team would analyze the training set data with statistical analysis software. If the software proposes multiple models, then the Data Analysis Team would apply a statistical method known as cross validation to identify the most appropriate model to predict parental class membership within a given subset of the training set.

13. Once the most appropriate model is identified, the Data Analysis Team would try to apply it to the available data for the test set of approximately 47,000 children referred to and discharged by ORR between July 1, 2017 and June 25, 2018. By applying the predictive model to the test set, the Data Analysis Team would identify the children in the test set who are more likely to have parents who are *Ms. L.* class members. As noted above, the use of the model in this way would enable the Data Analysis Team to organize the test set into strata according to increasing probability of parental class membership, to prioritize manual case file review.

14. As the Data Analysis Team applies the prediction model to the test set, the process may result in refinements to the model and segments themselves. For example, if the Case File Review Team positively identifies children of potential *Ms. L.* class members within a lower-probability band of the test set, this may result in the Data Analysis Team updating the variables it considers as part of its model.

15. The feasibility of this statistical method may turn on the availability, format, and comprehensiveness of the data for the children. Assuming, however, that the data is sufficient, the statistical method that I have described is a more rational approach than a date-ordered or randomized manual record review of the test set. If successful, it would front-load the identification of potential *Ms. L.* class members. It is possible that it could also reduce the overall time required for manual review.

Executed on April 5, 2019.



Barry I. Graubard

EXHIBIT 1

CURRICULUM VITAE

Name: Barry Ira Graubard January 15, 2019
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E-mail:graubarb@mail.nih.gov

Citizenship: United States

Education:

1968 High School Graduation, Groveton High School, Alexandria, VA

1968-1970 (68 Semester Hours, Major: Chemistry and Mathematics) Rensselaer Polytechnic Institute, Troy, New York

1972 B.S. (Major in Mathematics, Minor in Physics) University of Maryland, College Park, MD

1974 M.A. (Mathematics, Area: Statistics and Probability) Department of Mathematics University of Maryland, College Park, MD

1991 Ph.D. (Mathematical Statistics) Department of Mathematics, University of Maryland, College Park, MD

Other Training:

1977-1979 (12 Semester Hours) Survey Sampling and Biostatistics, George Washington University, Washington, DC

Employment:

1972-1976 Graduate teaching assistant in the Department of Mathematics, University of Maryland at College Park
1977-1980 Mathematical Statistician, National Center for Health Statistics
1980-1981 Mathematical Statistician, Alcohol Drug Abuse and Mental Health Administration
1981-1989 Mathematical Statistician, National Institute of Child Health and Human Development, Biometry Branch

1989-1996	Senior Researcher, National Cancer Institute, Biometry Branch, Clinical and Diagnostic Trials Section
1996-1997	Acting Chief Biostatistical Methodology and Cancer Control Section, National Cancer Institute, Biometry Branch
1997-1999	Senior Associate, Department of Biostatistics, Johns Hopkins University, taught a semester course "Analysis of Health Surveys"
2001-2002	Guest Lecturer, Department of Mathematics, University Maryland, taught a one semester workshop entitled "Analysis of Health Surveys"
1997-pres	Senior Investigator, Title 42, National Cancer Institute, Biostatistics Branch.

Membership in Professional Societies:

1977-pres	American Statistical Association
1977-pres	Washington Statistical Society
1980-pres	International Biometric Society Eastern North American Region (ENAR)
2010-pres	American Association for the Advancement of Science

Selected Committee and Board Membership:

1988-1990	ENAR Biometrics Society Regional Advisory Board
1991-1994	Washington Statistical Society Public Health and Biostatistics Program Chair
1994-1995	American Statistical Association Biometrics Section Program Chair
1994-1997	American Statistical Association Continuing Education Advisory Committee
1994	American Statistical Association ad hoc committee to review candidates for travel awards to 50th Session of the International Statistical Institute, 1995
1997-2001	American Statistical Association, Survey Methods Research Section, Chair, Continuing Education Committee
1998-2001	ENAR Biometrics Society Regional Committee
1998-1999	NCI Surveillance Implementation Group

1999-01	Ad hoc ENAR Biometrics Society Membership Committee
1999-pres	Federal Committee on Statistical Methodology
2000	Chair of Search Committee for tenure track / tenure research mathematical statistician, Biometry and Mathematical Statistics Branch, National Institute of Child Health and Human Development, NIH
2000-pres	Program Committee for Federal Committee on Statistical Methods Research Conference
2001-02	Program Committee for ENAR Biometrics Society 2002 Spring Meeting
2001	Chair of Search Committee for tenure track / tenure research mathematical statistician, Biometry and Mathematical Statistics Branch, National Institute of Child Health and Human Development, NIH
2001-04	United Nations Committee and contributor to UN Technical Report on the Analysis of Operating Characteristics of Surveys in Developing Countries.
2003-07	Editorial Board of the JNCI Cancer Spectrum
2004	Member of the National Children's Study Sampling Design Workshop, March 21-22.
2004	Institute of Medicine Workshop on Estimating the Contribution of Lifestyle-Related Factors to Preventable Death Dec. 13-14; presented “Calculating the number of deaths attributable to risk factor using national survey data.”
2005-06	Co-Program Chair of Section on General Methodology, American Statistical Association, 2006 Joint Statistical Meetings
2005-10	Advisory Board for the University of Minnesota Integrated Health Interview Series Project
2005	Expert Advisory Group to advise Harvard U on statistical methods for combining data from multiple surveys for developing measures of the diffusion and use of health information technology
2006- 08	ENAR Education Advisory Committee
2007-09	Chair of the American Statistical Association Committee on the Award of Outstanding Statistical Application
2007-08	Chair of the Division of Cancer Epidemiology and Genetics Committee on Scientists

2009 Chair Elect of the Biometric Section, American Statistical Association

2009 Member Expert Panel on the Redesign of the National Crime Victimization Survey

2009-10 DCEG Technical Evaluation of Protocols Committee

2009-10 Member of Selection Committee for Committee of Presidents Statistical Societies (COPSS) Snedecor Award

2010-11 Chair, Selection Committee for COPSS Snedecor Award

2009-10 Member of Selection Committee for Biometrics Section, American Statistical Association, David P Byar Award

2011 Chair Selection Committee for Biometrics Section, American Statistical Association, David P Byar Award

2009-10 DCEG Technical Evaluation of Protocols Committee

2011 Chair of Search Committee for tenure track / tenure research biostatistician/ statistician, Radiation Epidemiology Branch, NCI

2011-2012 DCEG Technical Evaluation of Protocols Committee

2011-pres Member of DCEG Promotion and Tenure Review Panel

2013 Reviewer for the American Statistical Association, National Science Foundation and Bureau of Labor Statistics Fellowship Program http://www.amstat.org/careers/pdfs/ASANSFBLSFellowshipProgram.pdf

2013 Reviewer for proposal to the Luxembourg National Research Fund (FNR) INTER MOBILITY programme.

2014-17 Washington Statistical Society Morris Hansen Lecture Committee

2014-15 Member of the Committee of Presidents of Statistical Societies (COPSS) Elizabeth L. Scott Award Committee

2016-17 Chair, Committee of Presidents of Statistical Societies (COPSS) Elizabeth L. Scott Award Committee

2014-17 Committee of Representatives to American Association for the Advancement of Science (AAAS)

2015 Patient-Centered Outcomes Research Institute (PCORI) Obesity

Observational Research Initiative Merit Review Panel

2017 Panel member of FDA Public Workshop on Abuse-Deterrent Opioids in Silver Spring, Md, July 10-11, 2017

2018-20 American Statistical Association Committee on Fellows

Editorial Boards

1997-pres Statistical Editor, Journal of the National Cancer Institute

2008-14 Editorial Board ASA/SIAM Book Series

2008-pres Associate Editor, Annals of Applied Statistics

Selected Lectures and Presentations:

1993 Invited Presentation, The Biometric Society-ENAR Spring Meetings, Philadelphia, PA, Statistical Validation of Intermediate Endpoints for Chronic Diseases."

1994 Invited Presentation, The Drug Information Association, Washington, DC, "Regression Analysis of Clustered Data."

1995 Invited Presentation, The Joint Statistical Meetings of the American Statistical Association, Orlando, FL, "Analysis of Population Based Case-Control Studies with Controls Selected from a Survey."

1996 Invited Presentation, Bureau of Medical Devices, Food and Drug Administration, "Analysis of Clustered Data."

1997 Invited Presentation, Department of Mathematics, University of Maryland, "Variance Estimation for Superpopulation Parameters"

1999 Invited Presentation, Department of Statistics, Texas A&M University, Variance Estimation for Superpopulation Parameters.

1994 -2006 Invited Lecturer Cancer Prevention and Control Fellowship Course, NCI, "Analyzing Health Surveys: Accounting for the Sample Design."

2000 Keynote Speaker, The 2000 Statistical Science Awards Ceremony, Centers for Disease Control and Prevention, Atlanta, GA, "Statistical Issues in Analyzing Health Surveys: Applications to Cancer Studies."

2001 Invited lecturer at the University of Maryland, Department of Mathematics, College Park, to teach fall semester workshop "Analysis of Health Survey Data" (Course: STAT 798A section 0104) ; meets one day a week for 1.5 hours**.**

2002 Invited presentation Joint Statistical Meetings, "Issues in Design-based Weighted Analysis of Survey Data"

2002 Invited 1-day course "Analysis of Complex Survey Data with Applications to Health Surveys" for the Statistics Canada 2002 Methodology Symposium on Modeling Survey Data for Social and Economic Research

2003 Invited tutorial at 2003 Spring ENAR Meeting: "Sample Survey Methods for Biostatisticians"

2003 Invited discussant at 2003 Spring ENAR Meeting "Sampling methods for selecting population controls"

2003 Invited speaker at Westat methodology seminar 'Estimating of Variance Components using Survey Data."

2004 Invited Short Course at Eleventh Annual Spring Research Conference, "Analysis of Complex Surveys."

2004 Invited presentation Joint Statistical Meetings, "Development of statistical methods to analyze complex health surveys for epidemiologic studies: Some methods and applications."

2004 Invited presentation at Harvard University School of Public Health, "Analyzing Survey Data: Estimation of population attributable risk and population variance components."

2004 Invited Discussant for Distinguished Lecture by Chris Skinner for Joint Program in Survey Methodology, University of Maryland, "Other Issues in Modeling Survey Data."

2005 Invited presentation University of Maryland School of Medicine, Baltimore, "Statistical issues in analyzing health surveys: application to cancer and mortality studies."

2005 Invited Discussant for Distinguished Lecture by Alastair Scott for Joint Program in Survey Methodology, University of Maryland, "Discussion of population-based case-control studies."

2006 Invited presentation Spring ENAR Meeting, Tampa, Fla. "Using national surveys to estimate the number of deaths attributable to a risk factor"

2006 Special Contributed Panel Session presentation Joint Statistical Meetings, Seattle, WA, "Finite population vs. superpopulation inference in sample surveys: How big is the difference?"

2006 Invited presentation Statistics Canada Symposium 2006, Ottawa, Canada, "Using national surveys to estimate the number of deaths attributable to a risk factor"

2006 Invited short course for the International Biometrics Conference, Montreal, Canada, "Analysis of Health Survey: Sample Survey Methods for Biostatisticians"

2007 Invited panel member of "Role of biostatisticians in policy issues" for the Spring ENAR Meeting, Atlanta, GA.

2007 Invited presentation at Mathematica, "To weight or not to weight"

2008 Invited presentation Joint Statistical Meetings, Denver, Colorado "Application of Peters-Belson to estimation of disparities."

2009 Invited presentation for Conference in Honor of Joseph Gastwirth, George Washington University, Washington, DC, " The use of the risk percentile curve in the analysis of epidemiologic data."

2009 Invited presentation for Joint Statistical Meetings, Washington, DC, "Use of Statistics at the Centers for Disease Control and Prevention and National Cancer Institute: Estimation of the numbers of all-cause and cause-specific deaths associated with body weight."

2011 Invited presentation Department of Statistics, George Washington University,"Conditional logistic regression with survey data."

2011 Invited presentation National Center for Health Statistics, "Conditional logistic regression with survey data."

2013 Invited presentation National Institute of Environmental Health Sciences, "Conditional logistic regression with survey data."

2013 Invited presentation, Scholars Summer at Census, US Census Bureau, "Conditional logistic regression with survey data."

2013 Invited presentation for Fall Outreach Symposium for the International Year of Statistics at the Bureau of Labor Statistics, "Estimating sibling recurrence risk in population sample surveys."

2014 Invited presentation Statistical Society of Canada 2014 Annual Meeting,

Toronto, "Estimating sibling recurrence risk in population sample surveys."

2018 Invited presentation at the 2018 Joint Statistical Meetings, "Population-Based Disease Risk Prediction Modeling Using National Survey, Clinical, and Registry Data: Application to Risk Prediction for Oropharyngeal Cancer in the US Population." Vancouver, Canada

2018 Invited Talk George Washington University, School of Public Health, "Statistical and Epidemiological Challenges in Utilizing the National Health and Nutrition Examination Survey (NHANES) Assessment of Oral Human Papillomavirus (HPV) Infection to Study Risk of HPV Infection and of Oropharyngeal Cancer in the US.", Washington, DC

Recent Grants

Unpaid Collaborator
"Trends in Socioeconomic Position and Diet Relationship" CA108274 PI: Kant, Ashima, Queens College, NY July, 2004 to June, 2007

Unpaid Collaborator
"SNP-based pseudo-semiparametric inference for the case-control studies" NIH-U01CA159424, National Institutes of Health PI: Li, Yan, University of Maryland, College Park, MD, September, 2011 to August, 2013.

Unpaid Collaborator
"Semiparametric inference for case-control studies with complex sampling" NIH 8513069, National Institutes of Health PI: Li, Yan University of Maryland, College Park, MD, September 24, 2013 to August 31, 2014.

Teaching Experience:

1972-76 Graduate Teaching Assistant – Conducted recitation classes for undergraduate courses in college algebra, calculus, linear algebra, and was a lecturer for introductory statistics course (STAT 100) for non-mathematics majors.

1980 Lecturer for a one semester undergraduate course in elementary probability and Stochastic processes for non-mathematics majors in Department of Mathematics, University of Maryland.

1997 Adjunct Professor at Johns Hopkins University Department of Biostatistics where I taught a one semester graduate course entitled "Analysis of Health Survey Data"

2001 Invited lecturer at the University of Maryland, Department of Mathematics, College Park, to teach fall semester workshop "Analysis of Health Survey Data" (Course: STAT 798A section 0104); met one day a week for about 1.5 hours.

2002 Invited 1-day course "Analysis of Complex Survey Data with Applications to Health Surveys" for the Statistics Canada 2002 Methodology Symposium on Modeling Survey Data for Social and Economic Research.

2003 Invited tutorial at 2003 Spring ENAR Meeting: "Sample Survey Methods for Biostatisticians"

2004 Invited Short Course at Eleventh Annual Spring Research Conference, "Analysis of Complex Surveys."

2006 Invited short course for the International Biometrics Conference, Montreal, Canada, "Analysis of Health Survey: Sample Survey Methods for Biostatisticians"

2015 Co-taught "Statistical Methods for Analysis of Complex Samples in Public Health" at University of Maryland, College Park, MD, course number SURV 699N for the Joint Program in Survey Methods.

Primary Mentor:

NCI Post-Doctoral Fellows:

Dr. Sowmya R Rao, 2002-2004, presently Associate Professor at the University of Massachusetts Medical School, Worchester, MA and Senior Statisticians in the Center for Health Quality, Outcomes and Economic Research (CHQOER) in the Veterans Administration Health Services Research and Development Service

Dr. Yan Li, 2006-2008, presently Associate Professor at the Joint Program of Survey Methods, University of Maryland, College park, MD

Dr. Sonya Heltshe 2008-2009, presently Assistant Professor and Senior Statistician at Seattle Children's Hospital, Seattle WA Center for Clinical and Translational Research

Dr. Victoria Landsman 2009-2011, presently Scientist & Biostatistician at Institute for Work and Health and Adjunct Professor at University of Toronto, Assistant Professor.

Dr. Orestis Panagiotou 2015-2016, presently Assistant Professor of Health Services, Policy and Practice (Research) at Brown University.

Dr. Noorie Hyun 2016-2017, presently Assistant Professor, Medical College of Wisconsin, Institute for Health & Equity, Division: Biostatistics Program

Dr. Marlena Maziarz 2017-2018, presently Assistant Professor, Lund University, Sweden.

Dr. Gregory Haber 2018- present.

Co-Advisor for Ph.D. Candidates:

Blossom H Patterson, Doctoral Dissertation (1998): "Latent Class Analysis of Sample Surveys," College of Education, Department of Measurement and Statistics, University of Maryland.

Dewei She, Doctoral Dissertation (2010): "Genetic Association Studies Using Complex Survey Data," Department of Statistics, George Washington University.

Wenliang Yao, Doctoral Dissertation (2012): "Estimation of ROC Curve with Complex Survey Data", Department of Biostatistics, George Washington University.

Cong Wang, Doctoral Dissertation (2017): "Analysis of Familial Aggregation Using Recurrence Risk for Complex Survey Data", Department of Statistics, George Washington University.

April D. Kidd, Doctoral Dissertation (2017): "Mammography Utilization in African American Women", School of Nursing, Duquesne University.

Lingxiao Wang, Doctoral Dissertation (currently), Topic: Making cohort studies representative of the US population using weighting methods, Dept. of Joint Program of Survey Methodology, University of Maryland

Yan Liu, Doctoral Dissertation (currently), Topic: Generalized Score Test for Complex Sample Data, Dept. of Statistics, George Washington University.

Ph.D. Dissertation Committees:

Dr. Blossom H Patterson, Dept. of Measurement, Statistics and Evaluation, University of Maryland, College Park
Dr. Tara Vogt, Dept Epidemiology, Yale University
Dr. Steven Moore, Dept Epidemiology, Yale University
Dr. Leah M Ferrucci, Dept Epidemiology, Yale University
Dr. Jianzhu Li, Dept. JPSM, University of Maryland, College Park.
Dr. Santanu Pramanik, JPSM, University of Maryland, College Park.
Dr. Hiroyuki Hikawa, Dept. of Statistics, George Washington University
Dr. Wenliang Yao, Dept. of Biostatistics, George Washington University
Dr. Cong Wang, Dept. of Statistics, George Washington University. Title: Analysis of Familial Aggregation using Recurrence Risk for Complex Survey Data. 10/2017
Dr. April D. Kidd, School of Nursing, Duquesne University. Title: Mammography Utilization in African American Women. 11/2017

Dr. Xia Li, Dept. Mathematics, University of Maryland, College Park. Title: Misspecified Weights in Weight-Smoothing Methods. 1/2018

Research Interests:

Design and Analysis of Complex Surveys and Epidemiologic Studies
Statistical Methods for Design and Analysis of Epidemiological Studies
Analysis and Design of Cluster Randomized\Community Studies and Nonrandomized Evaluation Studies
Classification and Discriminant Analysis
Population Genetics and Genetic Epidemiology

Reviewer for Selected Journals:

American Journal of Clinical Nutrition
American Journal of Epidemiology
American Journal of Public Health
Annals of Applied Statistics
Biometrics
Biometrika
Controlled Clinical Trials
Epidemiology
Journal of the American Statistical Association
Journal of the American Medical Association
Journal of Clinical Epidemiology
Journal of the National Cancer Institute
Statistics in Medicine
Survey Methodology
Journal of Official Statistics
Journal of the National Cancer Institute
Journal of the American Medical Association
New England Journal of Medicine

Honors and Awards:

1987	Quality Step Award, NICHD
1990	Snedecor Award - Presented by the American Statistical Association and the Biometric Society
1999	NCI Special Service Award of $5,000 for statistical leadership on the ASSIST Evaluation
1999	NIH Merit Award for fundamental contributions to statistical methods for survey studies, and exemplary collaborations in the analysis and interpretation of survey data.
2000	NIH Merit Award for extraordinary efforts in developing a conceptual framework and evaluation design for the American Stop Smoking Intervention Study (ASSIST)

2000	Elected Fellow of the American Statistical Association
2001	Division of Cancer Epidemiology and Genetics, NCI Mentor of the Year Award
2004	NIH Merit Award for consistent and high-quality effort work on the National Health Interview Survey and the California Health Interview Survey
2006	Charles C Shepard Science Award for Assessment and Epidemiology presented for scientific excellence by the publication of Excess deaths associated with underweight, overweight, and obesity, JAMA 2005; 293:1861-1867.
2009	NIH Merit Award for excellence in the measurement, analysis, and release of nationally representative data concerning serum biomarkers from the insulin-like growth factor axis.
2010	NCI Mentor of Merit Award for excellence in mentoring post and pre-doctoral fellows
2013	AAAS Fellow of Statistics Section
2015	NCI Group Merit Award: NCI Select Agents and Hazardous Biological Materials Search
2018	NCI Mentor Award

BIBLIOGRAPHY

Barry Ira Graubard

1. Eckardt MJ, Ryback RS, Rawlings RR, Graubard BI. Biochemical diagnosis of alcoholism: a test of the discriminating capabilities of gamma-glutamyl transpeptidase and mean corpuscular volume. *JAMA* 1981;246:2707-10.

2. Rawlings RR, Rae DS, Graubard BI, Eckardt MJ, Ryback RS. A methodology for the construction of a multivariate diagnostic instrument: an application to alcohol abuse screening. *Comput Biomed Res* 1982;15:228-39.

3. Eckardt MJ, Graubard BI, Ryback RS, Gottschalk LA. Pretreatment consumption as a predictor of posttreatment consumption in male alcoholics. *Psychiatry Res* 1982;982;7:337-44.

4. Rawlings RR, Graubard BI, Teper S, Eckardt MJ, Ryback RS. Two-group classification when both groups are mixtures of normals. *Biometrical J* 1984;26:923-30.

5. Forman MR, Graubard BI, Hoffman HJ, Beren R, Harley EE, Bennett P. The Pima infant feeding study: infant feeding and gastroenteritis in the first year. *Am J Epidemiol* 1984; 119:335-349.

6. Forman MR, Graubard BI, Hoffman HJ, Beren R, Harley EE, Bennett P. The Pima infant feeding study: breast feeding and respiratory infections during the first year of life. *Int J Epidemiol* 1984;13:447-53.

7. Klebanoff MA, Graubard BI, Kessel SS, Berendes HW. Low birth weight across generations. *JAMA* 1984;252:2423-27.

8. Mills JL, Graubard BI, Harley EE, Rhoads GG, Berendes HW. Maternal alcohol consumption and low birth weight: how much drinking during pregnancy is safe? *JAMA* 1984;252:1875-79.

9. Neale EA, Sher PK, Graubard BI, Habig WH, Fitzgerald SC, Nelson PG. Differential toxicity of chronic exposure to phenytoin, phenobarbital, or carbamazepine in cerebral cortical cell cultures. *Pediatr Neurol* 1985;1:143-50.

10. Sher PK, Neale EA, Graubard BI, Habig WH, Fitzgerald SC, Nelson PG. Differential neurochemical effects of chronic exposure of cerebral cortical cell culture to valporic acid, diazepam, or ethosuximide. *Pediatr Neurol* 1985;1:232-37.

11. Forman MR, Fetterly K, Graubard BI, Gaines K. Socio-demographic factors associated with breast feeding in the United States: 1969 and 1980. *Am J Clin Nutr*

1985;42:864-69.

12. Hemminki E, Graubard BI, Hoffman HJ, Mosher WD, Fetterly K. Cesarean section and subsequent fertility: Results from the 1982 National Survey of Family Growth. *Fertil Steril* 1985;43:520-28.

13. Shiono PH, Klebanoff M A, Graubard BI, Berendes HW, Rhoads GG. Birth weight among women of different ethnic groups. *JAMA* 1985;255:48-52.

14. Rawlings RR, Graubard BI, Teper S, Eckardt MJ, Ryback RS. Conditional quadratic discrimination in the identification of biological markers for disease screening. *Biometrical J* 1986;28:957-64.

15. Rawlings RR, Graubard BI, Faden VB, Eckardt MJ. A study on discriminant analysis techniques applied to multivariate lognormal data. *Journal of Statistical Computation and Simulation* 1986;26:79-100.

16. Kurinij N, Klebanoff MA, Graubard BI. Dietary supplement and food intake in women of childbearing age. *J Am Diet Assoc* 1986;86:1536-40.

17. Hemminki E, Myrianthopoulos NC, Pomeroy J, Graubard BI. Cesarean section as a risk factor for malformations - a negative finding. *Int J Epidemiol* 1986;15:360-3.

18. Mills JL, Graubard BI. La controversia sugli effetti del bere moderatemente durante la gravidanza. *La Tutela della Salute della Gestantee del Concepito* ACTA MEDICA 1986:123-9.

19. Graubard BI, Korn EL. Choice of column scores for testing independence in ordered 2xK contingency tables. *Biometrics* 1987;43:471-6.

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21. Mills JL, Graubard BI. Is moderate drinking during pregnancy associated with increased risk of malformations? *Pediatrics* 1987;80:309-14.

22. Mills JL, Graubard BI, Klebanoff MA. Placenta previa is not associated with an altered sex ratio at birth. *Br Med J* 1987;294:544.

23. Korn EL, Graubard BI. Examining neighborhood confounding in a survey: an example using the National Health and Nutrition Examination Survey II. *Stat Med* 1988;7:1087-98.

24. Eckardt MJ, Rawlings RR, Graubard BI, Faden VB, Martin PR, Gottschalk LA. Neurophychological performances and treatment outcome in male alcoholics.

Alcoholism: Clinical and Experimental Research 1988;12:88-93.

25. Davis M K, Savitz DA, Graubard BI. Infant feeding and childhood cancer. *Lancet* 1988;ii: 365-8.

26. Graubard BI, Fears TR, Gail MH. Effects of cluster sampling on epidemiologic analysis in population based case-control studies. *Biometrics* 1989;45:1053-71.

27. Forman MR, Hundt GL, Towne D, Graubard B, Sullivan B, Berendes HW, Sarov B, Naggan L. The forty-day rest period and infant feeding practices among Negev Bedouin Arab women in Israel. *Medicl Anthropology* 1990;12:207-16.

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32. Mills JL, Klebanoff MA, Graubard BI, Carey JC, Berendes HW. Barrier contraceptive methods and preeclampsia. *JAMA* 1991;265:70-3.

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37. Korn EL, Graubard BI. A note on the large sample properties of linearization,

jackknife and balanced repeated replication methods for stratified samples. *Annals of Statistics* 1991;19:2275-79.

38. Freedman L S, Graubard BI, Schatzkin A. Statistical validation of intermediate endpoints for chronic diseases. *Stat Med* 1992;11:167-78.

39. Forman MR, Lewando-Hundt G, Graubard BI, Chang D, Sarov B, Naggan L, Berendes HW. Factors influencing milk insufficiency and its long-term health effects: The Bedouin infant feeding study. *International Journal of Epidemiology* 1992;21:53-8.

40. Forman MR, Yao S Graubard BI, Qiao Y, McAdams M, Mao BL, Taylor PR. The effect of dietary intake of fruits and vegetables on the odd ratio of lung cancer among Yunnan Tin miners. *International Journal of Epidemiology* 1992;21:437-41.

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49. Faden VB, Graubard BI. Alcohol consumption during pregnancy and infant birth weight. *Ann Epidemiol* 1994;4:279-84.

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57. Kant AK, Schatzkin A, Graubard BI, Ballard-Barbash R. Frequency of eating occasions and weight change in the NHANES I Epidemiologic Follow-up Study. *Int J Cancer* 1995;19:468-74.

58. Malloy MH, Graubard BI. Access to home apnea monitoring and its impact on rehospitalization among very-low-birth-weight infants. *Ach of Pediatr and Adolesc Med*. 1995;149(3): 326-332.

59. Forman MR, Hundt GL, Berendes, HW, Abu-Saad K, Zangwill L, Chang D, Bellmaker I, Graubard BI. Undernutrition among Bedouin Arab children: A followup of the Bedouin Infant Feeding Study. *Am J Clin Nutr* 1995;61:495-500.

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62. Forman MR, Beecher GR, Lanza E, Reichman ME, Graubard BI, Campbell WS, Marr T, Yong LC, Judd JT, Taylor PR. Effect of alcohol consumption on plasma carotenoid concentrations in premenopausal women: a controlled diet study. *Am J Clin Nutr.*1995;62(1): 131-135.

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68. Nebeling LC, Forman MR, Graubard BI, Snyder RA. Specific and total carotenoid intake among oral contrceptive and estrogen hormone users in the United States. *J Am Coll Nutri* 1996;15(6):608-13.

69. Faden VB, Graubard BI, Dufour M. The relationship of drinking and birth outcome in a US national sample of expectant mothers. *Paediatr Perinat Epidimol* 1997; 11(2): 167-180.

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1996;81(10):3599-603.

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75. Nebeling LC, Forman MR, Graubard BI. Changes in carotenoid intake in the United States: the 1987 and 1992 National Health Interview Surveys. *Journal of American Dietetic Association* 1997;97:991-996.

76. Korn, EL, Midthune, D, Graubard, BI. Estimating interpolated percentiles from grouped data with large samples. *Journal of Official Statistics* 1997;13(4):385-400.

77. Faden VB, Hanna EH, Graubard BI. The effect of positive and negative health behavior on birth outcome. *Journal of Substance Abuse.* 1997;9: 63-76.

78. Fawzi W, Forman MR, Levy A, Graubard BI, Naggan L, Berendes HW. Maternal anthropometry and infant feeding practices in Israel in relation to growth in infancy: The North African Infant Feeding Study. *Am J Clin Nutr* 1997;65:1731-7.

79. Korn EL, Graubard BI. Scatter plots with survey data. *Am Stat* 1998; 52(1):58-69.

80. Potosky AL, Breen N, Graubard BI, Parsons PE. The association between health care coverage and the use of cancer screening tests: Results from the 1992 National Health Interview Survey. *Medical Care*.1998;36:257-70.

81. Fay MP, Graubard BI, Freedman LS. Conditional logistic regress with sandwich estimators: Application to a meta-analysis. *Biometrics.*1998;54:195-208.

82. Korn EL and Graubard BI. Variance estimation for superpopulation parameters. *Statistica Sinica.* 1998;8:1131-51.

83. Forman MR, Johnson E, Lanza E, Graubard BI, Beecher GR, Muesing R. Distribution of individual carotenoids in lipoproteins of premenopausal women: A controlled diet study. *Am J Clin Nutr* 1998:67;81-7.

84. Lanza E, Forman MR, Johnson E, Graubard BI, Beecher GR, Muesing R. Fluctuation and distribution of plasma alpha-tocopherol by phase of the menstrual *cycle. J Nutr* 1998:128; 1150-55.

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86. Graubard BI, Korn EL. Predictive margins with survey data. *Biometrics*. 1999:55;652-9.

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